

CITY OF MIAMI BEACH
BARGAINING UNIT GRIEVANCE PROCEDURE FORM

UNION GRIEVANCE #: _____

LABOR RELATIONS GRIEVANCE #: _____

Instructions: Spaces 1-9 should be typed so that the same information appears at all steps. The lower portion is to be completed at each step.

1. Bargaining Unit (check one only):

____ FRATERNAL ORDER OF POLICE (FOP)
____ AMERICAN FEDERATION OF STATE,
COUNTY & MUNICIPAL EMPLOYEES (AFSCME)

____ INTERNATIONAL ASSOCIATION OF FIREFIGHTERS (IAFF)
____ COMMUNICATIONS WORKERS OF AMERICA (CWA)
____ GOVERNMENT SUPERVISORS ASSOCIATION OF FLORIDA (GSAF)

2. Date of Occurrence:

3. Employee's Name & Classification:

4. Employee's Department/Division & Telephone Ext. (____):

5. Employee's Immediate Supervisor & Telephone Ext. (____):

6. Statement/Nature of Grievance:

7. Contract Article(s) Alleged Violated:

8. Suggested Adjustment:

9. _____
Employee Signature DateUnion Representative's Signature Date

TO BE COMPLETED AND PRESENTED AT EACH STEP

Step 1 - Presented by (signature/title) _____	Date: _____	Received by (signature/title): _____	Date: _____
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STEP 1 RESPONSE (FROM DIVISION TO PRESENTER)

____ Grievance Denied (state why):
____ Grievance Resolved (state how):

(signature/title) _____		Date: _____	
Step 2 - Presented by (signature/title) _____	Date: _____	Received by (signature/title): _____	Date: _____

STEP 2 RESPONSE (FROM DEPARTMENT TO PRESENTER)

____ Grievance Denied (state why):
____ Grievance Resolved (state how):

(signature/title) _____		Date: _____
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Step 3 - Presented by (signature/title) _____	Date: _____	Received by (signature/title): _____	Date: _____
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See Attached Reply to Step 3 from City Manager's Designee/Labor Relations

ARBITRATION REQUEST/Presented by (signature/title) _____	Date: _____	Received by (signature/title): _____	Date: _____
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COMMUNICATIONS WORKERS OF AMERICA

LOCAL 3178

ELECTION OF REMEDY FORM

Grievance No. _____

This form must be completed and signed at the initial step of the grievance procedure. Employee must elect, sign, and date only at the initial step of the grievance procedure:

1. _____ Grievance Procedure:

I/We elect to utilize the Grievance Procedure contained in the current Contract between the City of Miami Beach, Florida, and Communications Workers of America (CWA). I understand that this choice precludes my utilization of the Personnel Board.

Signature

Date